



THE
HEALTH
OF
HYDE
1965

BOROUGH OF HYDE

WITH THE COMPLIMENTS OF THE
MEDICAL OFFICER OF HEALTH

Public Health Department,
Municipal Buildings,
HYDE.



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BOROUGH OF HYDE

ANNUAL REPORT

of the
MEDICAL OFFICER OF HEALTH
for the year

1965

A. S. DARLING, M.B., B.Ch., D.P.H.
Health Department, Greenfield Street,
Hyde.

Tel: HYDe 4242

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BOROUGH OF HYDE HEALTH COMMITTEE

(31st December, 1965)

Chairman: Alderman B. S. Armitage

His Worship the Mayor: (Councillor P. Walsh)

Councillor A. Cryer

" H. E. Dunkerley

" E. H. Jessup

" J. B. Keighley

" H. J. Myles

Mrs. I. G. Jones

Councillor I. Stopford

STAFF OF THE BOROUGH OF HYDE HEALTH DEPARTMENT

1965

MEDICAL OFFICER OF HEALTH: A. S. Darling, M.B., B.Ch., D.P.H.

CHIEF PUBLIC HEALTH INSPECTOR: T. Nicholson

DEPUTY CHIEF PUBLIC HEALTH INSPECTOR: A. Blackhurst

ADDITIONAL PUBLIC HEALTH INSPECTORS:

J. M. Lowe (Resigned 23.4.65)

J. E. Williams

A. Swindells (Commenced 1.4.65)

I. Rowbotham (Commenced 12.4.65)

I. Wilson (Commenced 16.8.65)

CHIEF CLERK: B. Gorman

OTHER CLERICAL STAFF: H. Norgrove

K. Murphy (Resigned 8.5.65)

Mrs. A. Juby (nee Buttery) (Resigned 12.6.65)

H. J. Gee (Commenced 1.9.65)

SMOKE CONTROL ASSISTANT:

B. Selby

HYDE DIVISIONAL HEALTH COMMITTEE
(Cheshire County Council)

Members of the Divisional Health Committee

As on 31st December, 1965

CHAIRMAN

County Councillor W.H. Griffiths

DEPUTY CHAIRMAN

Councillor I. Stopford.

EX OFFICIO:

Alderman G. Astbury (Chairman, County Health Committee)
Alderman F. McBirnie (Deputy Chairman, County Health Committee)

COUNTY COUNCIL:

W.H. Griffiths Esq.,	Mrs. M. Bayes
J. Baldwin, Esq.,	E.F. Myles Esq.,
	Mrs. D.A. Topham

HYDE BOROUGH
COUNCIL:

W. Barton Esq.,	E.H. Jessup Esq.,
E.C. Clark Esq.,	Mrs. I.G. Jones
A. Cryer Esq.,	H.J. Myles Esq.,
W. Cullen Esq.,	I. Stopford Esq.,
H.E. Dunkerley, Esq.,	P. Walsh Esq.,

TINTWISTLE RDC.:

Councillor The Rev. T.M. Boulton

LONGDENDALE UDC.:

Councillor Miss D.E. Green

CO-OPTED MEMBERS:

Mrs. R. Frost,	representing Longdendale U.D.C.,
Mrs. P. Morris	" Divisional Executive for Education.
Mrs. B.A. Beever	" Tintwistle R.D.C.
Mrs. A. Heaton	" District Nursing Assn.
Dr. J.C.B. Bennett	" Local Medical Committee
Mrs. G.R. Adamson	" Hyde Borough Council
Mrs. B.S. Armitage	" " "
Dr. S.H. Jackson	" Ashton, Hyde & Glossop Hospital Management Cttee.

...oOo...

CLERK TO THE COMMITTEE:

Charles E. Spence, Esq.,

STAFF OF HYDE DIVISIONAL HEALTH AND SCHOOL MEDICAL
SERVICES OF THE CHESHIRE COUNTY COUNCIL

Divisional Medical Officer and
School Medical Officer:

* A.S. Darling, M.B., B.Ch., B.A.O., D.P.H.,

Assistant County Medical
Officer:

Jean M. Halliwell, M.B., Ch.B., M.R.C.S.,
L.R.C.P., D.Obst., R.C.O.G., D.C.H.
(commenced 3. 5. 65.)

Barbar Jones, M.B., Ch.B., (Resigned 30.4.65)

Dental Surgeon:

Miss L. Kippen, L.D.S., D.P.D.,

Consultant Anaesthetist:

Dr. C.A. Mays, M.B., Ch.B.,

Chief Clerk:

B. Gorman

Clerical Staff:

Mrs. S. Wilson

Mrs. B.A. Marshall

Mrs. J. Taylor
(nee Newton)

Mrs. A. Juby
(Resigned 25.6.65)

Miss M. Givens

Mrs. C.E.E. Dickinson

Miss J.C. Atkins

(commenced 29.7.65.)

Mrs. G. Starbuck-
Ashton

(resigned 30.11.65)

(Commenced 18.1.65.)

Health Visitors/School Nurses:

Miss M. Taylor

Miss D. Wood

Mrs. J. Beaumont

Mrs. E.M. Lowe

Mrs. M. Sherratt

(resigned 30.7.65)

(commenced 26.7.65)

Mrs. M. Harris

Miss M.M. Humphries

(commenced 1.2.65.)

District Nurses - Hyde:

Miss H. Sutton

Miss G. McLean

Mr. J.E. Billings

Miss E. Palfreyman

(Part-time staff in addition).

District Nurses - Mottram
and Broadbottom

Mrs. B. Scott

District Nurse - Hollingworth
and Tintwistle:

Mrs. M.A. Clarke

Miss W. Watkins

(commenced 8.9.65.)

Midwives:

Miss M. Coote

Mrs. E. Hudson

Mrs. K. O'Grady

Mrs. M. Williams

Miss M.M. Todd

Adult Training Centre Superintendent:

L.S.C. Thorpe

Junior Training Centre Supervisor:

Mrs. J. Tomkinson

Domestic Help Supervisor:

Mrs. F.M. Partridge (commenced 22.11.65.)

Mrs. F. Dobson (resigned 7.8.65.)

Mrs. M. Hampson (commenced 16.8.65.)

(resigned 4.11.65.)

Clinical Specialists attending Clinics in the Division

Orthopaedic Surgeon: / Mr. Wheble, F.R.C.S.,
Gynaecologist: / R.L. Gadd, F.R.C.S., M.R.C.O.G.,
County Oculist: Dr. F.W.C. Brown, M.D., Ch.B., D.P.H.,

Practitioners attending Clinics on Sessional basis:

Parsonage Street	Dr. V.M. Gadd
Bayley Hall	Dr. S.M. Y. Maxwell
Gee Cross	Dr. W. Tait & Dr. A.M.S. Thompson
Longdendale and Tintwistle	Dr. H.F. Sugden and Dr. R. Clarke
Hattersley	Dr. I. MacPherson & Dr. D.H. Wickenden

Senior Mental Welfare Officer: G. E. Lanceley

Speech Therapist: Mrs. R. Eaton

Peripatetic Teacher of the Deaf: D.L. Perry

/ Staff of Regional Hospital Board allocated to specific duties within the Hyde Division.

* Part-time Divisional Health, Part-time Borough Health.

.....
Mr. Mayor, Ladies and Gentlemen,

I have the honour to present to you my Report on the Health of Hyde during 1965.

Once again an apology is due for the delay which was due to the absence of certain statistical figures supplied by the Registrar General. These have only just become available.

The main point of interest during the year 1965 was the occurrence of four cases of poliomyelitis, one of which proved to be fatal. Though the outbreak was small, the disturbance caused in the locality was very considerable. The matter is discussed in greater detail later in the report.

Births and deaths are greater in number than in previous years, both reflecting the increase in our population which has resulted from the building and occupation of the Hyde portion of the Hattersley estate.

The death rate is slightly higher than last year but with a relatively small population such annual variations are to be expected. The general pattern of deaths is as in previous years, and, as for the past ten years, we still have a 20% excess over the national average. The reasons that I consider that are most likely to be the cause of this excess were dealt with in detail last year and I do not propose to weary you with a repetition of my thoughts on this subject. It will be sufficient to note that the major possibilities remain largely unchanged - poor housing, atmospheric pollution, industrialisation etc.

It is customary to express ones thanks to all who are concerned with the work of a public health department but on this occasion I must record a very special debt of thanks not only to the Chairman and members of the Public Health Committee, but also to a great host of others who at the time of the outbreak of poliomyelitis gave every possible support and assistance.

I am, Ladies and Gentlemen,

Yours faithfully,

A. S. DARLING

Medical Officer of Health

SECTION III

GENERAL STATISTICS

Area (in acres)	4,170
Population (Census 1961)	31,740
Population (Registrar-General's Estimates for 1965)	37,990
Number of Inhabited Houses as at 31st December, 1965	12,354

POPULATION

As the Hattersley Estate fills up so the Hyde population total moves with it. The mid-year figure for 1965 is estimated at 37,990. One result of this increase in population has been to redress the balance between young and old. Where at one time we had a population in which there was a deficiency of young people with an excess of older people, the very large number of children on the Hattersley Estate has given us an overall population structure very much akin to that of the nation as a whole.

LIVE BIRTHS REGISTERED

Legitimate	...Males	332	Females....	316	Total	648
Illegitimate	...Males	29	Females....	20	Total	<u>49</u>
						<u>697</u>

Grude Birth Rate...	Hyde 18.3	England and Wales ...	18.1
	Comparability Factor	...	1.06
	Local adjusted Birth Rate	...	19.4

STILLBIRTHS

Legitimate	...Males	6	Females...	7	Total	13
Illegitimate	...Males	-	Females...	-	Total	<u>-</u>
						<u>13</u>

DISCUSSION ON BIRTH RATE

The adjusted birth rate is 19.11 per thousand of the population. This is slightly down on the adjusted birth rate for 1964 which was 20.96 per thousand. Even so it is still a high figure.

CAUSES OF DEATH - FEMALE

CAUSES OF DEATH - FEMALE	Total all Ages	Under 4 weeks and under 1 year	AGE IN YEARS									
											75 and over	
			1-	5-	15-	25-	35-	45-	55-	65-		
1. Tuberculosis, Respiratory	-	-	-	-	-	-	-	-	-	-	-	
2. Tuberculosis, Other	1	-	-	-	-	-	-	1	-	-	-	
3. Syphilitic Disease	1	-	-	-	-	-	-	-	-	-	-	
7. Acute Poliomyelitis	1	-	-	1	-	-	-	-	-	-	-	
9. Other Infective & Parasitic Diseases	1	-	-	-	-	-	-	-	-	-	-	
10. Malignant Neoplasm, Stomach	6	-	-	-	-	-	-	2	1	3	2	
11. Malignant Neoplasm, Lung, Bronchus	6	-	-	-	-	-	-	2	1	2	2	
12. Malignant Neoplasm, Breast	5	-	-	-	-	-	-	3	1	2	-	
13. Malignant Neoplasm, Uterus	2	-	-	-	-	-	-	1	1	1	-	
14. Other Malignant and Lymphatic Neoplasms	24	-	-	-	-	-	-	1	5	9	2	
15. Leukaemia, Aleukaemia	4	-	-	-	-	-	-	-	2	1	2	
16. Diabetes	1	-	-	-	-	-	-	-	6	8	1	
17. Vascular Lesions of Nervous System	52	-	-	-	-	-	-	1	3	13	36	
18. Coronary Disease, Angina	47	-	-	-	-	-	-	1	3	7	30	
19. Hypertension with Heart Disease	5	-	-	-	-	-	-	-	4	1	4	
20. Other Heart Disease	28	-	-	-	-	-	-	1	1	1	16	
21. Other Circulatory Disease	12	-	-	-	-	-	-	-	1	2	10	
23. Pneumonia	17	-	-	-	-	-	-	1	1	5	13	
24. Bronchitis	14	-	-	-	-	-	-	-	2	1	7	
25. Other Diseases of Respiratory System	2	-	-	-	-	-	-	1	1	2	1	
26. Ulcer of Stomach and Duodenum	3	-	-	-	-	-	-	-	-	-	-	
27. Gastritis, Enteritis & Diarrhoea	-	-	-	-	-	-	-	-	-	-	-	
28. Nephritis and Nephrosis	-	-	-	-	-	-	-	-	-	-	-	
30. Pregnancy, Childbirth, Abortion	1	-	-	1	-	-	-	-	-	-	-	
31. Congenital Malformations	2	-	-	1	-	-	-	-	1	-	-	
32. Other Defined & Ill-Defined Diseases	28	-	-	2	-	-	-	1	5	5	11	
33. Motor Vehicle Accidents	2	-	-	-	-	-	-	-	-	-	-	
34. All Other Accidents	3	-	-	1	-	-	-	-	-	-	-	
35. Suicide	-	-	-	-	-	-	-	-	-	-	-	
Total all causes	267	2	4	1	1	4	2	5	9	32	63	144

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE DURING 1965 IN THE MUNICIPAL BOROUGH OF HYDE

CAUSES OF DEATH - MALES	Total all Ages	Under 4 weeks	4 weeks and under 1 year	AGE IN YEARS						
				1-	5-	15-	25-	35-	45-	55
1. Tuberculosis, Respiratory	2	-	-	-	-	-	-	-	-	1
2. Tuberculosis, Other	-	-	-	-	-	-	-	-	-	-
3. Syphilitic Disease	1	-	-	-	-	-	1	-	-	-
7. Acute Poliomyelitis	1	-	-	-	-	-	-	-	-	-
9. Other Infective & Parasitic Diseases	-	-	-	-	-	-	-	-	-	-
10. Malignant Neoplasm, Stomach	3	-	-	-	-	-	-	-	-	-
11. Malignant Neoplasm, Lung, Bronchus	16	-	-	-	-	-	-	-	1	6
12. Malignant Neoplasm, Breast	-	-	-	-	-	-	-	-	-	-
14. Other Malignant & Lymphatic Neoplasms	27	-	-	-	2	-	-	2	-	9
15. Leukaemia, Aleukaemia	-	-	-	-	-	-	-	-	-	-
16. Diabetes	-	-	-	-	-	-	-	-	-	-
17. Vascular Lesions of Nervous System	32	-	-	-	-	-	-	-	1	-
18. Coronary Disease, Angina	63	-	-	-	-	-	-	5	11	15
19. Hypertension with Heart Disease	1	-	-	-	-	-	-	-	-	-
20. Other Heart Disease	25	-	-	-	-	-	-	-	2	2
21. Other Circulatory Disease	5	-	-	-	-	-	-	-	-	-
23. Pneumonia	14	1	-	-	-	-	-	2	1	4
24. Bronchitis	25	-	1	-	-	-	-	1	1	4
25. Other Diseases of Respiratory System	3	-	-	-	-	-	-	-	-	2
26. Ulcer of Stomach and Duodenum	2	-	-	-	-	-	-	-	-	-
27. Gastritis, Enteritis and Diarrhoea	1	-	-	-	-	-	-	-	1	-
28. Nephritis and Nephrosis	1	-	-	-	-	-	-	-	-	1
29. Hyperplasia of Prostate	2	-	-	-	-	-	-	-	-	-
31. Congenital Malformations	4	4	-	-	-	-	-	-	-	-
32. Other Defined and Ill-Defined Diseases	23	7	-	-	1	2	1	1	2	1
33. Motor Vehicle Accidents	9	-	-	-	1	1	-	-	1	2
34. All other Accidents	5	-	1	-	-	-	-	-	-	-
35. Suicide	7	-	-	-	-	1	-	-	1	3
Total all causes	272	12	2	1	4	4	4	11	22	49

DEATHS REGISTERED

Males 272 Females 267 Total 539
Death Rate: Hyde 14.2 England and Wales: 11.5
Comparability Factor: 1.05
Local adjusted Death Rate: 15.0

The total number of deaths registered at all ages was 539 giving a crude death rate of 14.2 per 1,000, compared with the average figure of 14.49 for the previous five years. For comparative purposes with other areas this rate - adjusted by using the comparability figure supplied by the Registrar General - is 15.0 per 1,000 population as against 11.5 for the whole country.

Approximately 69 per cent of the deaths occurred in persons over pensionable age, the actual figures being

	M		F	
	No.	%	No.	%
Deaths under 65 years of age	109	40%	60	23%
Deaths between 65 and 74 years of age	78	29%	63	24%
Deaths 75 years and over	85	31%	144	53%
Totals	272	100%	267	100%

INFANT AND PERINATAL MORTALITY RATES

The number of infants who died under the age of 12 months was 20 revealing an infant mortality rate of 28.9 per 1,000 births. There were 13 still-births during the year giving a still-birth rate of 18.3 per 1,000. As an indication of the risk of child-birth it is useful to consider the peri-natal mortality, i.e. still-births plus infant deaths in the first week of life. With this standard the Hyde figure is 38.0 per 1,000.

SECTION IV

INFECTIOUS DISEASES

1. Food Poisoning

In February 1965 a major outbreak of food poisoning occurred at one of our local factories. Altogether 17 cases were affected. There were no deaths. This outbreak was of interest in that it occurred in a well staffed canteen where the standard of hygiene was unusually high. The organism that caused the symptoms of abdominal pain and diarrhoea, was *Clostridium Welchii*, a germ that may be present to some extent in any large joint of beef. With the normal size of household joint any germs that may be in the meat are killed by the cooking process but in this case the joints were large and the slow cooking process used did not succeed in killing all the germs in the centre of the meat rolls. Refrigeration after cooking was also inadequate and when the meat was served the following day ample opportunity had been given for the surviving germs to multiply exceedingly. The meat looked good and tasted good but the victims of that meal were many. It cannot be too strongly emphasised that whenever possible meat should be cooked most thoroughly and eaten as soon after cooking as is practicable.

2. Poliomyelitis

On the morning of Tuesday, August 24th, 1965, a girl aged 3 years and 11 months died at Ashton General Hospital after an illness that had lasted for only 36 hours. Though the death was attributed to pneumonia it was suspected that poliomyelitis might have had something to do with it. The diagnosis had not been confirmed before death because the child had not lived long enough for the investigations to be completed. The result of enquiries made on the spot strengthened the suspicion that this could have indeed been a case of poliomyelitis and while final confirmation was being awaited arrangements were put in hand to provide oral vaccination for all the population of the area in which the child lived. She came from a home on the Hattersley Estate and it was already known that many of the children on that Estate had not taken advantage of the clinic in their midst and were still unprotected against poliomyelitis. With the co-operation of the Education Department it was arranged to open clinics in two schools on the Estate. Confirmation came quickly, and by the evening of Wednesday, 25th August, the pathologist was able to state definitely that poliomyelitis had been present in the dead child. The organism itself was identified by the Public Health Laboratory service the following day. With the co-operation of a local member of the press, publicity was given to the fact that an outbreak had occurred and that it was desirable that all members of the local population should receive a dose of the oral vaccine as soon as possible. The response was overwhelming and by the evening of Friday, 27th August, virtually the whole of the Hattersley population had received their first dose of oral vaccine from the traditional lump of sugar.

Though it had been my intention not to extend the vaccination programme to the rest of Hyde until such time as it might prove necessary, the demand on the morning of Friday, 27th August, proved so great that three additional clinics had to be opened in the rest of Hyde. By 5 p.m. on Sunday, 29th August, it was estimated that 28,000 people had passed through the five emergency clinics operating in the Hyde area. Several thousand others had also received a dose of the vaccine either at work or through their own general practitioner.

By this time it was also known that there were three other cases of poliomyelitis from the same area. Two were young children with a mild non-paralytic form of disease. The fourth was an adult just over the Hyde border in Longdendale and he was critically ill. He died on Tuesday, 31st August. A brother of the dead 3 year old girl subsequently developed a non-paralytic attack which was attributed to the wild virus.

The epidemic ended as suddenly as it began and I have no doubt that its abrupt termination was due to the rapidity with which the general public came forward to receive a dose of the tame vaccine virus. The wild virus that had made its appearance with such tragic results was unusually virulent and in a population that had largely neglected the protection afforded by vaccination, one would normally have expected a major outbreak with many cases of paralysis. Additional virus studies carried out before the confirmation of the first case showed that the wild virus had only gained a small footing on the Estate. The excellent response of the local population to the emergency vaccination programme prevented any further spread.

In the three homes that were afflicted by poliomyelitis none of the children had been vaccinated against the disease. The facilities for this vaccination were on their doorstep, for a weekly clinic was held within a few hundred yards of their homes. Had these families been vaccinated it is unlikely that the outbreak would ever have occurred. One fortunate result of the scare is that the vaccinal state of the Hyde population is now at an all time "high". In the weeks that followed advantage was taken of the opportunity to give a full course of the oral vaccine to all of school age and under who had not received the oral vaccine before. Second and third doses were also offered to all adults who had come for the first dose and altogether over 50,000 doses of the vaccine were distributed through the five clinic centres that were set up in the Hyde area. The running of these emergency clinics would have been a major problem had it not been for the immense amount of help given so freely, not only by the members of the Public Health Department but also by others of the Local Government service and also by the general public. It is not possible to name all but I would like to record publicly my thanks to the many whose assistance so greatly eased the burden. In particular I must record my sincere gratitude to the Chairman of the Public Health Committee for his unfailing kindness and support during the outbreak. Apart from this local help there was also of course the very expert help given by the consultants at Ashton General Hospital and Withington Public Health Laboratory.

In view of certain recent publicity given to the suggestion that poliomyelitis vaccine may contribute to the causation of congenital abnormalities, it is worthy of note that there has been no such increase in the Hyde population during the 12 months that followed the mass vaccination programme during the autumn of 1965.

SECTION V

Report of the Chief Public Health Inspector

To the Mayor, Aldermen and Councillors of the Borough of Hyde.

Mr. Mayor, Ladies and Gentlemen,

I have pleasure in presenting my report on the work carried out by the Public Health Inspectors' section of the Health Department during 1965.

Probably the most important single feature of our work in 1965 has been in offices and shops under the Offices, Shops and Railway Premises Act, 1963. In 1964 we had so far as we know, got all the premises registered, and commenced inspecting them. In 1965 we have completed the initial inspection of the registered premises, and given owners or occupiers written notice of the work required to comply with the Act.

Despite shortage of staff, it will be seen that the work of slum clearance, smoke control, meat inspection in the slaughterhouse of T. Wall and Son (Meat and Handy Foods) Limited, rodent control and other routine work has gone forward steadily.

I would like to express my appreciation to the Chairman and Members of the Health Committee and to Dr. Darling for their support during the year, and to the staff of the Health Department for their loyal help and co-operation.

Your obedient servant,

T. NICHOLSON

SECTION VI

SANITARY CIRCUMSTANCES IN THE AREA

WATER SUPPLY

Water is supplied by Manchester Corporation (Woodhead supply) and is available to almost every dwelling in the Borough and is satisfactory in quality and quantity. The service reservoirs have all been roofed over, and a new service reservoir to replace Pudding Lane reservoir was ready in March 1965, when Pudding Lane reservoir was taken out of commission.

The new Godley filtration plant is now completed and in commission, which means that all the water supplied to Hyde is now filtered. To those of us who remember the many complaints of discoloured water we used to get only a few years ago, this is a great advance.

A local supply for industrial purposes is stored in small reservoirs in the town and is filtered but considered unfit for domestic use without sterilisation.

37 samples of drinking water were taken, only one of which was unsatisfactory. The Manchester Corporation also maintains regular bacteriological and chemical analysis, including examination for plumbosolvency.

SEWAGE

Reconstruction to extend the Sewage Works was completed in 1939 involving radial flow sedimentation followed by bacteriological filtration and humus treatment. The works have recently required further extension to accommodate increased industrial flow and overspill development in the Hattersly area. These extensions include sludge digestion as part of the treatment, and they were completed early in the year.

PUBLIC SWIMMING BATHS

The Hyde Corporation Baths were opened on 4th May, 1899 and extended in 1913. Of the two Swimming Pools, one has a capacity of 100,000 gallons and the other 60,000 gallons. There are also two suites of Slipper Baths - Males 14 and Females 7; and 1 Russian Remedial Bath which will accommodate 9 persons at a time.

A Municipal Laundry was attached to the Baths in 1955, consisting of eight Laundry Benches in which washer, spin dryer and sink are combined, and twelve drying horses. There were 12,298 users during the year.

The heating of the Baths and Laundry is carried out by a Lancashire Boiler combined with a Hodgkinson's underfeed automatic stoker and automatic water feed-pump.

The water supplied to the Baths is that collected locally for Industrial use stored in reservoirs within the town boundary and is filtered prior to delivery. The Filtration system installed in 1938 consists of two horizontal Pulsometer Filters with a turnover of 3 hours for each pool. Each pool has its own chlorinator which operates the breakpoint system with which a free chlorine residual of 2p.p.m. is maintained. Chlorine content and pH value are tested by means of a colorimetric Lovibond comparator using Houseman Palintest D.P.D. Chlorine Tablet No. 1 for chlorine content and phenol red tablet for pH value. An alkalinity test is also taken daily, and a pH value of 7.8 to 8.0 is maintained.

Ten samples of water have been taken with satisfactory results. No B.Coli have been found in any sample taken since June, 1949.

The number of bathers and spectators for the year ended 31st December, 1965 was 83,750.

SWIMMING INSTRUCTION OF SCHOOL CHILDREN

The Swimming Baths are extensively used by Education Departments for the teaching of swimming to scholars in Hyde, Longdendale, Bredbury and Denton.

Both Swimming Pools are in use from 9 a.m. to 4 p.m. from Monday to Friday inclusive making 110 classes per week. The number of scholars who attended the baths during the 1965 season was 62,360. Three qualified instructors assisted by the class teachers give swimming instruction. Various tests of ability are carried out from time to time. "The Advanced Certificate of Swimming" is the test aimed at by the Education Authority, but many children go on to take the Amateur Swimming Association Personal Survival Awards and also the Royal Life Saving Society Medallions. The winners of the Advanced Certificate of swimming receive free contracts carrying admission to the baths during the following season. 57 free contracts were issued in 1965.

SECTION VII INFECTIOUS DISEASES

The figures given in Tables 1 and 2 reveal the number of cases of infectious disease among the population.

CASES OF INFECTIOUS DISEASES NOTIFIED DURING THE YEAR 1965

Notifiable Diseases	Under 1 year					5 to 9	10 to 14		15 to 24		25 plus	Age Unknown	Total
	1	2	3	4	5		10	15					
Scarlet Fever	-	-	1	2	5	20	1	1	-	-	1	31	
Whooping Cough	1	-	-	-	-	-	-	-	-	-	-	1	
Measles	7	6	22	20	19	37	2	-	-	-	-	113	
Sonne Dysentery	-	-	-	1	-	-	-	1	1	-	-	3	
Fuerperal Pyrexia	-	-	-	-	-	-	-	-	1	-	-	1	
Acute Encephalitis	-	-	-	-	1	-	-	-	-	-	-	1	
Tuberculosis:-													
Pulmonary	-	-	-	1	-	-	-	2	8	-	-	11	
Non-Pulmonary	-	-	-	-	-	1	-	-	-	-	-	1	
Erysipelas	-	-	-	-	-	-	-	1	1	-	-	2	
Food Poisoning	-	-	-	-	-	-	-	-	-	-	-	-	
Typhoid	-	-	-	-	-	-	-	-	-	-	-	-	
Pneumonia	-	-	-	-	-	1	-	-	-	-	-	1	
Poliomyelitis:-													
Paralytic	-	-	-	1	-	-	-	-	1	-	-	2	
Non-Paralytic	-	1	1	-	-	1	-	-	-	-	-	3	
	8	7	24	25	25	60	3	5	12	1		170	

TABLE 2INFECTIOUS DISEASES 1958 - 1965

This table indicates the trend of the more common infectious diseases since 1958:-

	<u>1958</u>	<u>1959</u>	<u>1960</u>	<u>1961</u>	<u>1962</u>	<u>1963</u>	<u>1964</u>	<u>1965</u>
Scarlet Fever	67	38	14	19	48	14	12	31
Measles	217	411	17	548	69	302	269	113
Whooping Cough	1	39	29	16	3	7	14	1
Tuberculosis of Lungs	10	8	8	29	9	6	23	11
Tuberculosis of other sites	1	-	2	2	2	-	-	1
Poliomyelitis	1	-	-	2	-	-	-	5

REMOVAL TO SUITABLE PREMISES OF PERSONS IN NEED OF CARE
AND ATTENTION

In urgent cases where removal to hospital is required without delay, action can be taken under the National Assistance (Amendment) Act, 1951, and an order can be made by a local Justice of the Peace requiring the patient to be taken to hospital or other suitable accommodation. The action is only taken where there is complete lack of home care and where the person refuses all care and attention.

HOUSING

SLUM CLEARANCE

Nine Clearance Areas were represented during the year, five of them, Nos. 113,114,115,116 and 117 being made the subject of Compulsory Purchase Orders, and the remainder Clearance Orders.

The Clearance Areas were:-

No. 109 (Commercial Brow)	2	houses
No. 110 (Gibraltar Row)	16	"
No. 111 (Tanner Street)	3	"
No. 112 (Farmside)	4	"
No. 113 (Grafton Street)	3	"
No. 114 (George Street)	5	"
No. 115 (Union Street)	12	"
No. 116 (Grafton Street)	77	"
No. 117 (Ferns Street)	15	"

No objections were made in respect of five areas, Nos. 109,110,112, 113,114. Public Inquiries have been held in respect of the other four areas. All the Orders were confirmed with the exception of No. 111, in which two houses were held to be not sufficiently defective to be classed as unfit.

The Orders confirmed included four houses closed under Closing Orders, and another owned and closed by the Council. The confirmed C.P.O's also included 14 houses as "grey land", whose occupiers will probably be rehoused by the Council.

In addition, fourteen Individual Unfit Houses were represented, these being dealt with as follows:-

Demolition Orders	-	4
Closing Orders	-	10

One house owned by the Corporation was also closed.

Compulsory Improvement of Houses

Towards the end of the year our first Improvement Area was declared, the King George Road Area, which contains 185 houses, 33 of which are tenanted. Of the tenanted houses, seventeen require improvement, the grant payable for the work required being estimated at £1490.

STATISTICS

NUMBER OF NEW HOUSES ERECTED DURING THE YEAR

1. By the Local Authority 17
2. By other bodies or persons 714
(including 650 dwellings
in Manchester Overspill
Development in Hattersley).

INSPECTION OF DWELLING HOUSES DURING THE YEAR

1.	(a)	Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	1033
	(b)	Number of inspections made for this purposes	2586
2.	(a)	Number of dwelling houses (included under sub head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932	206
	(b)	Number of inspections made for the purpose	206
3.		Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation.	152
4.		Number of dwelling houses (exclusive of those referred to under the preceding sub head) found not to be in all respects reasonably fit for human habitation.	50

REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICE

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers	69
---	----

ACTION UNDER STATUTORY POWERS DURING THE YEAR

Proceedings under Public Health Acts:-

(1)	Number of houses in respect of which Notices were served	50
(2)	Number of houses in which defects were remedied:-	
	(a) by owners	44
	(b) by Local Authority	6

OVERCROWDING

One case of overcrowding was reported during the year. It concerned a flat having one living room, and two bedrooms. One of these bedrooms was considered unfit because it had no natural lighting or permanent ventilation, and the flat was therefore too small for the family of four who occupied it. The owner agreed to close the flat, and the family was rehoused. -- Another case of overcrowding reported in 1964 was also abated - this concerned two families totalling ten persons living in a two bedroom house.

At the end of 1965 two houses were overcrowded, two families totalling 12 persons being affected.

<u>DEFECTIVE HOUSES</u>	<u>1934-56</u>	<u>1957</u>	<u>1958</u>	<u>1959</u>	<u>1960</u>	<u>1961</u>	<u>1962</u>	<u>1963</u>	<u>1964</u>	<u>1965</u>	<u>Total</u>
Houses demolished or finally closed	545	106	172	199	110	94	185	145	193	237	1986
Houses or parts of houses closed or vacated	115	11	1	-	-	-	-	-	-	-	127

NUMBER OF PERSONS DISPLACED FROM HOUSES TO BE DEMOLISHED OR CLOSED:

<u>From</u>	<u>Families</u>	<u>Persons</u>
Clearance Areas 1965	137	312
Individual Houses 1965	14	30
Total since inception of programme in 1934	1696	5016

BOROUGH OF HYDE - HOUSING DEPARTMENT

Lettings during calendar year 1965.

Transfers	36	
Exchanges	<u>21</u>	57
From unfit houses	130	
From unfit prefabs.	<u>6</u>	136

FROM GENERAL WAITING LIST

Total No. of Families

Lodgings in council houses	11	
Lodgings in private houses	9	
Tenants	<u>19</u>	39

OTHERS

Salford Overspill	1	
Staff Appointments	4	
Key Workers	<u>2</u>	7
		<u>7</u>
	Total	<u>239</u>

CERTIFICATES OF DISREPAIR

No applications for Certificates of Disrepair were received during the year, nor applications for the cancellation of Certificates of Disrepair.

Disinfection and Disinfestation

During the year the following articles were destroyed at the request of their owners, following deaths, long illnesses, or for other reasons -

Beds	89
Bedsteads	58
Mattresses	101
Pillows	<u>96</u>

Three houses were found to be bug infested, and were treated by the Department. Two were Council houses.

Treatment was also carried out in 19 cases for the eradication of cockroaches from houses and food premises.

CLOSET ACCOMMODATION

The number of premises fitted with closets of the various types at the end of 1965 was approximately:-

<u>W.C's with cistern flush</u>	<u>W.C's hand flushed and waste water</u>	<u>Privies</u>	<u>Pails</u>	<u>Chemical Closets</u>
11,176	2,123	9	36	2

In 1948 the Council provided a grant of £5 to be paid towards the cost of converting waste-water closets to cistern-flushed W.Cs, and up to the end of the financial year 1962-63, 1,083 grants had been approved. At this stage the Council decided on a policy of compulsory conversion, and in 1964-65 tenders were accepted for the compulsory conversion of 152 waste-water closets, and in addition provision made for 182 voluntary conversions. The new grant for voluntary conversions was fixed at £13 or half the cost of the work, whichever is the lesser. This amount was increased to £15 in December, 1965.

INSPECTION OF THE BOROUGH

The following table has been prepared to show the number and nature of the inspections made during the year, the number and type of notices served, and the result of such notices.

TABLE 3

STATEMENT OF SANITARY INSPECTIONS FOR YEAR ENDING 31ST DECEMBER, 1965

INSPECTIONS	NO. OF NOTICES SERVED			RESULTS OF SERVICE OF NOTICE		
Nature	Number	Informal	Statutory	Complied with by owner or occupier	Complied with by Corporation in default	Notices Outstanding
Noise abatement	37	-	-	-	-	-
Recorded Housing Inspections	206	-	-	-	-	-
Other Houses under P.H.A. or H.A.	1033	175	42	144	11	33
Re-visits to property under notice	1553	-	-	-	-	-
Courts, Yards and Passages	5	-	-	-	-	-
Pail Closets	2	-	-	-	-	-
Ashbins	49	8	-	8	-	-
Slaughterhouses	415	-	-	-	-	-
Visits re Defective Water Supplies	12	-	-	-	-	-
Ice Cream Premises	66	-	-	-	-	-
Bakehouses	98	-	-	-	-	-
Licensed Premises	44	-	-	-	-	-
Other Food Premises	228	21	-	21	-	-
Farms	35	-	-	-	-	-
Ice Cream Samples (Methylene Blue)	29	-	-	-	-	-
Water-Bacteriological & Chemical Samples	48	-	-	-	-	-
Smoke Observations & Other Smoke Visits	61	-	-	-	-	-
Visits and Re-visits re Smoke Control Areas	792	-	-	-	-	-
Common Lodging Houses	1	-	-	-	-	-
Piggeries	6	-	-	-	-	-
Factories with Mechanical Power	79	1	-	1	-	-
Factories without Mechanical Power	4	-	-	-	-	-
Offensive Accumulations	45	9	-	9	-	-
Infectious Diseases	119	-	-	-	-	-
Verminous Premises	53	-	-	-	-	-
Offensive Trades	14	-	-	-	-	-
Rodent Control	255	-	-	-	-	-
Public Conveniences	83	-	-	-	-	-
Shops O.S.R.P.	677	245	-	16	-	229
T.W.C. conversions	839	-	-	-	139	-
Diseases of Animals Acts	18	-	-	-	-	-
Refuse Removal	252	-	-	-	-	-
Refuse Disposal	222	-	-	-	-	-
Salvage	56	-	-	-	-	-
Movable Dwellings	38	-	-	-	-	-
Cinemas etc.	9	-	-	-	-	-
Committees etc.	56	-	-	-	-	-
Interviews	492	-	-	-	-	-
Street Animals Act and Animal Boarding Establishments	13	-	-	-	-	-
Miscellaneous	2	-	-	-	-	-
Totals	8046	459	142	199	150	262

TABLE 4

DEFECTS REMEDIED DURING 1965Dwelling Houses

Defective ceiling construction	7
" plaster	23
" floors	13
" kitchen ranges, fireplaces and flues	15
" windows and cords	22
" doors	12
" staircases	3
" damp proof courses	11
" sinks	4
" sink waste pipes	3
" skirting boards	2
" water supply	7
" roofs	55
" external walls	6
" pointing and brickwork of walls	7
" chimneys	6
" chimney flashings	2
" rain water pipes	21
" eavesgutters	30
" dustbins and sanitary pails	6
" drains	58
" choked W.C.'s	42
" W.C. apparatus	14
" W.C. buildings	28
" Baths	5
" Inspection Chambers and Covers	3

Factories

Miscellaneous Nuisances	3
-------------------------	---

Food Premises

Washing facilities	3	10
Floors, walls and ceilings	1	6
Limewashing	5	-
Others	3	7
Roof Leakages	3	-
First Aid Boxes		11
	—	—
Total	15	34
	—	—

Mobile Vans

INSPECTION AND SUPERVISION OF FOOD

Meat Inspection

There is one slaughterhouse in the borough, that attached to the factory of T. Wall and Sons (Handy Foods) Limited, used for the slaughter of pigs only. A staff of three inspectors are engaged there on meat inspection - two "authorised meat inspectors" full time, and one public health inspector, one week at a time on rota. In addition, the major part of the time of another public health inspector is spent in making up the team during holidays and absences through sickness.

The following table gives the results of meat inspection carried out in 1965.

Number of pigs killed	243,233
Number of pigs inspected	243,233

All Diseases or Conditions except Tuberculosis

Whole carcasses condemned	172
Carcasses of which some part or organ was condemned	30,220
Percentage of number inspected affected with disease other than Tuberculosis	12.5%

Tuberculosis Only

Whole carcasses condemned	6
Carcasses of which some part or organ was condemned	4,413
Percentage of number inspected affected with Tuberculosis	1.8%

Meat Condemned

	<u>Tons</u>	<u>Cwts</u>	<u>Qrs</u>	<u>Lbs</u>
Abscesses	21	-	-	13
Arthritis	4	12	1	1
Bruising	5	15	-	20
Cirrhosis & M.S.	12	7	2	14
Emaciation	-	14	2	5
Enteritis	40	11	3	5
Fever	1	5	3	9
Nephritis	-	10	-	-
Oedema	-	7	-	-
Pericarditis	4	14	-	14
Peritonitis	7	9	2	24
Pleurisy	4	11	3	25
Pneumonia	20	10	1	8
Tuberculosis	32	8	-	3
Urticaria		13	1	19
Miscellaneous	1	14	2	23
Total	159	6	2	25

OTHER FOOD CONDEMNED

Meat:-

Canned Meat

Tons	Cwts	Qrs	Lbs
1	0	2	3

Other Food:-

Canned

1	14	-	1
2	14	2	4

FOOD HYGIENE (GENERAL) REGULATIONS 1960

During the year 529 visits to food premises were made, particular attention being paid to catering establishments.

The following table shows the number of food premises covered by these Regulations, divided into the various trades, and showing how they comply with Regulations 16 and 19.

Trade Category	Number	Number fitted to comply with Reg.16	Number to which Reg.19 applies	Number fitted to comply with Reg.19
Public Bodies (Hospitals etc)	5	5	5	5
Restaurants and Cafes	14	14	14	14
School Canteens	4	4	4	4
Works Canteens	28	28	28	28
Fried Fish Shops	27	27	27	27
Bakehouses	30	30	30	30
Slaughterhouse) Bacon Factory and) Meat Products)	1	1	1	1
Wholesale Grocers	4	4	4	4
Retail Grocers	92	92	-	-
Butchers	31	31	31	31
Fishmongers	5	5	5	5
Confectioners	17	17	-	-
Miscellaneous	91	91	-	-
Licensed Premises	47	47	47	47
Beerhouses	15	15	15	15
Clubs	18	18	18	18
Off-Licences	12	12	-	-
	441	441	229	229

MILK SUPPLY (REGISTRATION AND LICENCES)

Under the Milk and Dairies (General) Regulations, 1959, there are registered 110 Milk Distributors and 15 Dairies.

MILK SAMPLING

The County Council, as licensing authority, have taken the following samples in Hyde, and submitted them to the appropriate tests in the Public Health Laboratory in Manchester.

Methylene Blue Test

73 samples of Tuberculin Tested Milk (5 unsatisfactory).

Methylene Blue and Phosphatase Tests

62 samples of Pasteurised T.T. Milk (1 unsatisfactory).

Turbidity Test

33 samples of Sterilised Milk - all satisfactory.

Biological Test

10 samples of T.T. milk were submitted to biological tests and none were found to contain tubercle bacilli. No sample of raw milk has been found to contain tubercle bacilli since 1959, when there was only one.

Brucella

74 bulk samples of raw milk were tested. Of these 49 were positive to the ring test, but in none were organisms of the brucella group isolated on direct culture.

At the end of 1965, there were nine dairy herds in the borough from which milk was sold to the public.

The Liquid Egg (Pasteurisation) Regulations, 1963

55 samples were taken during the year. Of these, 31 samples satisfied the a-Amylase test, and one did not, the offender being warned. The other 24 samples - of cracked raw eggs or of egg albumen were examined bacteriologically, and in none were organisms of the typhoid or salmonella groups grown.

There are no egg pasteurisation plants in Hyde.

ICE CREAM

There are six manufacturers and 157 vendors of Ice-Cream on the register. Of the manufacturers, two manufacture Ice Cream regularly.

During the year 39 samples were submitted to the Methylene Blue Test. One was found to be unsatisfactory.

SMOKE CONTROL

We have three Smoke Control Orders in operation, viz. No. 1 (Cheetham Fold) date of operation 1st June, 1961, and covering 688 premises (677 dwellings); No. 2 (Gee Cross) - date of operation 1st October, 1962 and covering 1702 premises (1,636 dwellings); No. 3 (Hattersley) - date of operation 1st September, 1962, and covering 2085 premises (2083 dwellings). These three areas cover a total area of 850 acres.

No. 4 Order (Back Bower) was submitted to the Ministry a second time in October, 1964, after revising estimates of costs and fuels required, and has now been confirmed and it will come into operation on September 1st, 1966. This area covers 1132 acres and contains 918 premises (885 dwellings).

INVESTIGATION OF ATMOSPHERIC POLLUTION

Volumetric Method

Apparatus for the estimation of the concentration of smoke and sulphur dioxide by the volumetric method is operated in the Health Department, measurements being taken daily. The following table shows the daily mean concentrations during each month of 1965.

Estimation of Daily Mean Concentration of Smoke and Sulphur Dioxide by the Volumetric Method

Site	Smoke Concentration Microgrammes per cub. meter			Sulphur Dioxide Concentration Microgrammes per cub. meter		
	Average	Highest	Lowest	Average	Highest	Lowest
<u>Health Dept.</u>						
January	307	776	64	161	413	30
February	314	1180	96	187	420	81
March	213	488	80	157	255	63
April	193	368	104	148	288	51
May	130	360	32	59	174	16
June	74	176	16	20	40	7
July	106	176	48	24	64	13
August	107	237	40	97	118	19
September	136	379	81	210	397	144
October	168	330	56	356	637	136
November	225	517	73	389	605	223
December	205	1024	104	191	400	100

The average daily mean concentration for 1965 are shown below, compared with corresponding figures for the two previous years.

Estimated Daily Mean Concentrations of
Smoke (u gms. per cub.met) SO₂ (u gms. per cub.met)

<u>Year</u>		
1965	182	167
1964	226	159
1963	202	169
1962	255	201

It is difficult to make comparisons of these figures without taking into account climatic conditions and other factors. But they do suggest that in the town's centre there is a steady diminution in atmospheric pollution.

Lead Peroxide Method

Late in 1951 two Lead Peroxide posts for measuring Sulphur Dioxide were erected in Hyde, one in Birch House yard, the other near Back Bower Reservoir. In October 1959 two more were erected in the comparatively rural area of Hattersley, one at Sundial Cottage, Pudding Lane, the other near Fields Farm. These were intended to serve the dual object of comparing the outskirts of the town with the town centre, and of comparing the amount of Sulphur Dioxide in the atmosphere recorded before and after Manchester Overspill Development in Hattersley.

The posts in Birch House and Back Bower were removed in April 1960, and replaced by a volumetric apparatus for measuring smoke and Sulphur Dioxide in the air daily, this apparatus being placed in the Health Department. The four Lead Peroxide posts were all up together for only six months, and the monthly figures for this period are given below:

Results in milligrammes of Sulphur Trioxide per 100 sq.cms of lead
peroxide per day during

	<u>October 1959</u>	<u>Nov 1959</u>	<u>Dec 1959</u>	<u>Jan 1960</u>	<u>Feb 1960</u>	<u>Mar 1960</u>
Birch House	1.70	2.13	2.11	3.02	3.07	2.48
Back Bower Res.	1.83	2.07	2.14	3.12	2.66	1.69
Fields Farm	1.29	1.31	1.52	2.17	2.04	1.82
Sundial	1.19	1.00	1.23	1.86	2.03	1.70

The following table gives average figures for each year:-

	<u>1952/3</u>	<u>1953/4</u>	<u>1954/5</u>	<u>1955/6</u>	<u>1956/7</u>	<u>1957/8</u>	<u>1958/9</u>	<u>1959/60</u>
Birch House	1.66	2.37	2.23	2.27	2.05	2.19	2.19	1.90
Back Bower Res.	1.33	1.98	1.76	2.03	1.81	1.92	2.01	1.80
	<u>1959/60</u>	<u>1960/61</u>	<u>1961/62</u>	<u>1962/63</u>	<u>1963/64</u>	<u>1964/65</u>		
Fields Farm (or Pinfold School)	1.32	1.21	1.12	1.33	-	1.78		
Sundial	1.24	1.25	1.29	1.57	1.40	1.31		

The post near Fields Farm was damaged during building operations in 1963, and so few results were obtained there during 1963/64 that a representative figure for that year cannot be obtained.

The replacement post was erected in the grounds of Pinfold School, Hattersley.

The first new dwellings in Hattersley Overspill Development were occupied in May 1963. By the end of 1964, 1576 dwellings were occupied and by the end of 1965, the total was 2,226. The figures of pollution by SO₂ show very little increase between May 1963 and March 1965, despite the hundreds of dwellings built and occupied in that time. Hattersley was declared a Smoke Control Area before 1963, but many of the new dwellings use solid fuel for heating and a greater increase for sulphur dioxide was expected. There should be little further increase because the later Hattersley dwellings use gas or electricity for heating.

RODENT CONTROL

Under the Prevention of Damage by Pests Act, 1949, the Local Authority is responsible for inspecting the district to discover rodent infestations. The inspection and treatment of business premises, particularly food premises, occupies a large proportion of the time of the rodent operative.

In addition, much work has been done in treating infestations in private dwellings (this work being carried out free of charge); in inspecting Local Authority property and treating where necessary; and in carrying out two "Maintenance Treatments" for the destruction of rats in sewers together with surface treatments of the Sewage Works.

The number of premises found to be infested during the year was 236, (152 rats and 84 mice). Of the 84 infestations by mice none could be classed as "serious". A total of 259 treatments was carried out to deal with these infestations, and the number of visits made was 1,787.

The table on the following page gives details of the work done:-

PREVENTION OF DAMAGE BY PESTS ACT, 1949

Report for 12 months ended 31st December, 1965

	Local Authority	Dwelling Houses	TYPE OF PROPERTY All other (including Business and Industrial)	Total	Agricultural
1. Total number of properties in Local Authority's district	29	12,926	1,492	14,447	45
2. Number of properties inspected as a result of (a) notification (b) Survey or (c) otherwise	- 4 -	186 463 445	44 274 236	230 769 681	- 25 -
3. Total Inspections carried out including re-inspections	89	1,135	563	1,787	50
4. No. of properties inspected in Section II which were found to be infested by:-					
(a) Rats	-	-	-	-	-
(b) Mice	4	97	27	128	-
(c) Major (Minor)	-	-	-	-	-
5. Number of infested properties treated by the Local Authority	4	158	41	203	-
6. Total treatments carried out including re-treatments	11	207	41	259	50
7. Number of Notices served under Section 4					
(1) Treatment	-	-	-	-	-
(2) Structural works (i.e. proofing)	-	-	-	-	-
8. Number of "Block" Control schemes carried out	1	-	-	1	-

It was not found necessary to take any proceedings under the Act

PREScribed PARTICULARS ON THE ADMINISTRATION
OF THE FACTORIES ACT, 1961

PART 1 OF THE ACT

1 - INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors)

Premises (1)	Number on Register (2)	Number of		
		Inspection (3)	Written notices (4)	Occupiers Prosecuted (5)
(i) Factories in which Sections 1,2, 3,4 and 6 are to be enforced by Local Authorities	20	4	2	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	202	79	-	-
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	17	-	-	-
Total	239	83	2	-

2 - Cases in which DEFECTS were found

(If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more cases).

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			to H.M. Inspector	by H.M. Inspector	
(1)	(2)	(3)	(4)	(5)	(6)
Want of cleanliness (S.1)	2	2	0	2	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable Temperature (S.3)	—	—	—	—	—
Inadequate Ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)	—	—	—	—	—
(a) Insufficient	—	—	—	—	—
(b) Unsuitable or Defective)	2	2	—	—	—
(c) Not separate for sexes	1	1	—	—	—
Other offences against the Act (not including offences relating to Outwork)	2	2	—	—	—
Total	7	7	—	2	—

3 - OUTWORKERS. 16 workers were registered, 11 of whom made wearing apparel, and 5 worked on rubber products.

Offices, Shops and Railway Premises Act, 1963

All the premises shown by our survey to require registration under this Act with the local authority have now been registered and after a special effort detailed inspections of the premises were completed before the end of the year. Letters were sent to the owners or occupiers of the premises where defects were found, setting out what was required in the premises concerned.

A total of 673 visits for all purposes have been made during 1965. The following tables give the results of the work in statistics.

Table A

Registrations and General Inspections

<u>Class of Premises</u>	<u>No. of Premises registered during year</u>	<u>Total No. of Premises registered at end of year</u>	<u>No. of registered premises receiving a general inspection during the year</u>
Offices	44	113	111
Retail Shops	15	316	307
Wholesale Shops, Warehouses	17	23	23
Catering Establish- ments open to the public, canteens	-	9	7
Fuel Storage depots	-	2	1

Table B

No of visits for all kinds by Inspectors to registered premises - 673

Table C

Analysis of Persons Employed

<u>Class of Workplace</u>	<u>No. of Persons employed</u>
Offices	593
Retail Shops	865
Wholesale Departments, warehouses	176
Catering Establishments open to the public	293
Canteens	6
Fuel Storage Depots	8
	<u>1941 - 834 Mal.</u>
	1107 Fe-
	mal

Analysis of defects found and notified during 1965

Section 4.	Cleanliness	167
Section 5.	Overcrowding	13
Section 6.	Temperature	140
Section 7.	Ventilation	35
Section 8.	Lighting	50
Section 9.	Sanitary Conveniences	138
Section 10.	Washing Facilities	69
Section 11.	Drinking water and vessels	6
Section 12.	Accommodation for Clothing	17
Section 13.	Seating Facilities	5
Section 14.	Seats for Sedentary Workers	3
Section 15.	Eating Facilities	17
Section 16.	Floors, passages etc.	122
Section 17.	Dangerous Machinery	9
Section 24.	First Aid Boxes	96
Section 50.	Information for Employees	164

Exemptions

Only one application was made for exemption against the requirement to provide sanitary accommodation in a retail shop, on the grounds that it could be provided in a warehouse belonging to the shop and situated in an adjoining street. The application was refused by the Council.

Accidents

Six accidents were reported during the year. None had fatal consequences, but in one case a broken leg was sustained by a female shop assistant who fell when walking on an inclined ramp. On investigation it was found that there had been no breach of the Act by the employer.

All the other accidents were also investigated and after consultation with our legal department it was recommended to the Council that no further legal action should be taken.

Two of the accidents occurred in public houses when the persons concerned were engaged in moving beer barrels. The other four occurred in retail shops. In each case the accident was discussed when the employer or manager, and advice given on means of avoiding recurrence of the accidents.

Lighting

Inspections of 110 premises were carried out during the latter three months of 1965. The following notes form a summary of the detailed work carried out by the Inspectors.

(1) General Impressions

- a) Natural Lighting The general standard in the older type of shop and office premises is in many respects not too good, a rather better standard is maintained in office premises. In corridors and stairways the standard is poor. Similarly in single external water closet compartments little if any natural lighting is to be found.

Lighting (cont'd)

- b) Artificial Lighting The standards of artificial lighting in working rooms, selling areas, stairways, corridors and offices was found to be very reasonable, and supplemented any poor natural lighting found with a few exceptions. Artificial lighting in outdoor water closets has not been provided in many cases.

(2) Unsatisfactory Lighting In only one case was the lighting (both natural and artificial) so bad that special attention was drawn to it. This was a combined corridor and staircase with no natural lighting and very poor artificial lighting. The owner was required to redecorate the area in a bright colour and provide a larger light.

All water closets not provided with artificial means of lighting have been required to do so.

(3) In discussions which took place whilst inspections were in progress, the following standards were recommended as being reasonable.

	<u>Lumens</u>
Stairs Corridors	7 - 10
Rough Work	15 - 20
Shop Counter, Kitchen	20 - 30
Medium Work Office Work	30 - 45
Sewing, Cutting	45 - 70
Fine Work	70 - 150

(4) In only one case was the question of glare raised, this was in circumstances where a large office window was facing due South, giving very bright glaring sunlight. A venetian sunblind was provided by the owner. The method adopted by our Inspectors was to question operators and accept their statement, having observed the working conditions.

(5) No. of offices where lighting was found below:-

	<u>Natural</u>	<u>Artificial</u>
a) 5 Lumens	2	-
b) 5 - 10 Lumens	-	-
c) 10 - 15 Lumens	-	-
d) 15 - 25 Lumens	1	2
Over 25 Lumens	2	3

Lighting (cont'd)

The standard of lighting in shops working areas compared to selling areas were as follows:

<u>Shop (Selling area)</u>		<u>(Storeroom etc.)</u>	
<u>Natural</u>	<u>Artificial</u>	<u>Natural</u>	<u>Artificial</u>
9	48	5	19
-	40	2	9
2	22	2	10
-	30	-	34
12	20	30	46
-	50	10	60
10	50	40	55
30	64	20	52

Summary

Although the observations were made during the months when the light (natural) is gradually reducing in intensity, the standard of lighting was fair in most cases. I feel it will be very difficult to apply a set standard of lighting based on natural light, adequate artificial light is a better method of approach, having a greater degree of control.

In one case zero readings on the photo electric meter were registered in a coffee bar having controlled subdued lighting. No objections were raised by any members of the staff, and any increase in the lighting would spoil the effect created. A light of greater intensity was provided in another room at the rear of the premises where meals were prepared and cleansing carried out.

Shops - Hours of Closing

No complaints of trading outside permitted hours were received during the year.

DISEASES OF ANIMALS ACTS

Swine Fever

Hyde was included in a Swine Fever Infected Areas, Special Order in April, May and June, 1965. Two cases of swine fever occurred in the borough.

In addition to the many licenses received concerning movement of pigs to Wall's slaughterhouse, 17 applications for licences and 8 licences reporting movement of pigs were received and the necessary visits and inspections made.

REFUSE COLLECTION

A regular weekly collection of domestic refuse was again maintained, apart from short periods around holidays. This is undoubtedly largely due to the Bin Incentive Bonus Scheme which we have operated since February, 1952. The binmen are required to complete a basic task of 120 bins per man per day, and a bonus of 3d. paid for every bin in excess of that figure.

	<u>1965</u>
Total Ashbins emptied	861,687
No. of loads of refuse collected	9,205
Estimated weight of refuse collected	22,077 tons

REFUSE DISPOSAL

Refuse was disposed of by controlled tipping at Raglan Street. This site is only expected to last two years, after which we shall move to the Dunkirk Farm site, the purchase of which has now been completed.

SALVAGE

The following are the quantities of salvage material sold during 1965:-

	<u>tons.</u>	<u>cwts.</u>	<u>qrs.</u>
Waste Paper	126	9	3
Bottles	4	18	-
Textiles	3	17	-
Metals	-	10	-
	<u>135</u>	<u>14</u>	<u>3</u>

Services administered by the Hyde and Longdendale Divisional Health Committee through powers delegated by the County Council.

CARE OF MOTHERS AND YOUNG CHILDREN

Central Clinic and Divisional Health Office.

Work on this building is proceeding and it is now believed that it will be completed in September, 1966.

The clinics at Hattersley and Stockport Road continued to function throughout the year with increased attendances.

It is expected that the new clinic at Hattersley will be completed and operating early in the Spring of 1966 and that the new clinic in Hollingworth will come into use in the spring of 1966.

The voluntary committees again rendered invaluable assistance at the various clinics thereby ensuring that Health Visitors were able to concentrate on duties of a more professional nature and this assistance is greatly appreciated.

The Clinics administered by the Divisional Committee and the attendances thereat are as under:-

<u>TABLE I</u> <u>(a) Infant Welfare</u>	<u>No. of</u> <u>Sessions</u>	<u>New</u> <u>Cases</u>	<u>Total</u> <u>Attend-</u> <u>ances</u>	<u>Examined</u> <u>by</u> <u>doctor</u>	<u>1965</u>	<u>Average</u> <u>Attendances</u> <u>Previous 5</u> <u>years</u>
Hyde (Parsonage St.)	51	199	4247	291	83	55
Hyde (Bayley Hall)	99	221	4367	681	44	41
Hyde (Stockport Road)	47	111	2408	231	51	-
Hyde (Hattersley)	52	197	2039	814	39	-
Hollingworth	24	68	1419	203	58	49
Tintwistle	24	35	869	102	36	29
Broadbottom	24	19	784	155	32	29

A summary of attendances at ante-natal classes for mothers expected to be confined at home is given in Table I. (b). The attendances have risen over the years and almost every mother who has her baby at home is now being seen. Routine blood specimens are taken; relaxation classes are held and co-operation with family doctors is well maintained.

<u>(b) Mothers</u>	<u>No. of</u> <u>Sessions</u>	<u>New</u> <u>Cases</u>	<u>Total</u> <u>Attend-</u> <u>ances</u>	<u>Examined</u> <u>by</u> <u>doctor</u>	<u>Average</u> <u>Attendances</u> <u>1965</u>
Ante-natal (Domiciliary Cases)	50	205	985	960	19
Ante-natal (Relaxation Classes)	48	154	1028	-	21
Ante-natal (Hattersley)	52	127	948	930	18
Dental (Expectant and Nursing Mothers)	-	30	104	-	-

HYDE - PARSONAGE STREET

In addition to services run by the County Council these premises are used daily for Physiotherapy treatment under the administration of the Hyde Orthopaedic After-Care Committee. There is also an ante-natal clinic for mothers who are to have their babies in hospital which is attended by a Consultant Obstetrician and Staff from the Aspland Maternity Home. Sessions are held as follows:-

Monday (2-4p.m.) (Discontinued after 15th June, 1964).	Child Welfare Clinic at which a Medical Officer and Health Visitor attend.
Monday (1st & 3rd) (2-4p.m.)	Toddlers' Clinic - by appointment.
Tuesday (1st & 3rd) (10a.m.-12 noon)	Clinic for testing hearing of toddlers. This is conducted by a specially trained Health Visitor.
Wednesday (2 - 4p.m.)	Child Welfare Clinic attended by a Medical Officer and two Health Visitors.
Thursday (2 - 4p.m.)	Ante-natal Clinic for cases who wish to be confined at home. A Medical Officer, Health Visitor, and Domiciliary Midwife attend and relaxation classes are conducted by Physiotherapists.

HYDE -BAYLEY HALL

Monday (2nd and 4th) (2 - 4p.m.)	Clinic for testing hearing of toddlers. This is conducted by a specially trained Health Visitor.
Tuesday (2 - 4p.m)	Child Welfare Clinic attended by a Medical Officer and Health Visitor.
Friday (2 - 4p.m)	Child Welfare Clinic attended by a Medical Officer and Health Visitor.

HYDE - GEE CROSS

Monday (2 - 4p.m)	Child Welfare Clinic at which a Medical Officer and Health Visitor attend.
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HYDE - HATTERSLEY

Thursday (2 - 4p.m)	Child Welfare Clinic at which a General Practitioner and a Health Visitor attend.
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HOLLINGWORTH

Sessions are held at Wedneshough Green Clinic as follows:-

Tuesday (2 - 4p.m)	Ante-natal Clinic at which a Health Visitor and Midwife attend.
Thursday (1st & 3rd) (2 - 4p.m.)	Child Welfare Clinic at which a general practitioner and Health Visitor attend.
Tuesday (2 - 4p.m.)	Minor Ailment Clinic at which a Health Visitor attends.

A Medical Officer attends monthly at an immunisation clinic.

BROADBOTTOM

A Child Welfare Clinic is held at the Methodist Church School on the first and ~~third~~ Wednesday of each month and a general practitioner and a Health Visitor are in attendance.

TINTWISTLE

A General Practitioner and Health Visitor attend the Child Welfare Clinic which is held in Christ Church School on the second and fourth Thursday of each month.

GENERAL

From the above clinics children under 5 may be referred for opinion or treatment to special clinics. Ophthalmic and Dental cases are dealt with at the School Clinic; Orthopaedic and Ultra Violet Ray Clinics are held at the Physiotherapy Centre, Parsonage Street. Hearing tests of infants are carried out by specially trained Health Visitors.

Details are given in Table II below.

<u>TABLE II</u>	<u>New Cases</u>	<u>Total Attendances</u>	<u>Professional Consultations</u>
Orthopaedic.....	55	442	267
Ultra Violet Ray-Children..	35	316	32
Ophthalmic.....	-	1	1
Dental - Children.....	43	79	43
Hearing - Children....	324	329	-

SALE OF WELFARE AND PROPRIETARY FOODS

National Welfare Foods

National Dried Milk, Orange Juice, Cod Liver Oil, and Vitamin Tablets are issued from the Divisional Office and from each of the Child Welfare Clinics. Table IIIa gives particulars of the issues during the year.

TABLE III(a)

National Dried Milk	-	3,325	tins at 2/-d. each	...	...	...	£387.18. 4.
National Dried Milk	-	2,587	" at 4/-d. "	...	...	...	417. 8. 0.
National Dried Milk	-	172	" free	...	...	...
Orange Juice	-	7,688	bottles at 1/6d. each	...	...	...	576.12. 0.
Orange Juice	-	311	" free	...	...	...
Cod Liver Oil	-	591	" at 1/-d each	...	...	...	29.11. 0.
Cod Liver Oil	-	98	free	...	...	...
Vitamin A & D		620	packets at 6d each	...	...	...	15.10. 0.
Vitamin A & D	-	7	" free	...	...	...

Proprietary Foods

Certain infant foods, mainly milk and cereal products are available at the Infant Welfare Centres and particulars of sales at Hyde are given in table III(b). At other clinics the sale of proprietary foods is controlled entirely by the Voluntary Committees and details of sales are not available.

TABLE III (b)

						<u>Total Sales</u>		
						£	s	d
Parsonage Street...	...	...	...	...	...	639.	17.	3.
Baylye Hall	...	...	...	...	...	865.	0.	6.
Gee Cross	...	...	...	...	...	507.	2.	6.
Hattersley	...	...	...	...	...	260.	8.	1.
						£ 2,272.	8.	4.

HEALTH VISITORS

During 1965 five Health Visitors were employed on full time duties in the Borough of Hyde and one Health Visitor was employed in the Longdendale and Tintwistle districts.

The duties of the Health Visitor include the visiting of families with children under 5. She advises the parents on general health, matters affecting the family and on the mental, physical and emotional health of children including advice on parent-craft and house-hold management where necessary. Apart from the routine first visit to new born babies further visiting is of necessity selective.

The Health Visitors attend the Child Welfare and Ante-natal Clinics and in conjunction with the Midwives give advice and talks on health education and mother-craft. An increasing amount of time is taken up in visiting the aged and in many instances the Health Visitor has co-operated with voluntary organisations and the family doctor in an endeavour to keep old persons healthy in their own homes as long as possible.

In her general role of family visitor she is often the first person to observe the onset of physical or mental stress and can arrange help either through statutory or voluntary services at an early stage.

TABLE IV

Numbers and Types of Visits to Homes

	<u>Mothers</u> <u>Ante-</u> <u>Natal</u>	<u>Under</u> <u>1 year</u>	<u>Children</u> <u>1 - 5</u> <u>years</u>	<u>School</u>	<u>Re</u> <u>Home</u> <u>Helps</u>	<u>T.B.</u>	<u>After-</u> <u>Care</u>
Hyde	199	2,548	5,127	206	102	129	911
Longdendale and Tintwistle	192	865	1,712	186	51	30	882
Total 1965	391	3,413	6,839	392	153	159	1,713
Total 1964	403	3,442	5,709	427	42	161	1,377

The total number of visits during the year was 13,060 as against 12,453 in 1964.

The majority of Health Visitors possess motor cars and travelling expenses are paid by the County Council under the Essential Car User Scheme.

DISTRICT NURSING

We now have seven full-time District Nurses employed throughout the Division; one male and six female, and these are assisted by part-time staff when necessary. The male nurse is employed also in the Stalybridge and Dukinfield Division.

This service is, of course, administered by the County Council but general practitioners are authorised to call directly on the service and much of the work is connected with the elderly and infirm who in many cases are permanently confined to bed and require regular visits from the nurses. It will be appreciated that as the number of elderly persons increases more and more demands are made on the nursing staff. A considerable amount of time also is spent in advising the relatives of chronic sick patients who may be living with them.

Special reference is made in the Care and After-Care section of this Report concerning the loan of nursing requisites although the District Nurses play a big part in the issue of smaller items of equipment.

DOMICILIARY MIDWIFERY

	<u>1964</u>	<u>1965</u>
Total number of births in Division	767	797
Delivered at home	245	259

There are five midwives in the Division; three for the Hyde area, one for Longdendale and Tintwistle and, one for Hattersley. Although the Midwives are allocated to the areas mentioned above they do, in practice, perform duties in any part of the Division should the necessity arise.

FAMILY PLANNING

A new venture for this part of the world was pioneered by the Hyde Divisional Health Committee during 1965. A request to the local Family Planning Association for help in meeting the need of certain families in the Hyde Area, was met with the suggestion that a domiciliary Family Planning service should be tried out for the benefit of those mothers who were unable or unlikely to come to clinics. A recommendation to this effect ~~went~~ to the County Health Committee with the support of the County Medical Officer. Eventually a grant was obtained from the County and with a like sum of money put up by the Manchester and Stockport Family Planning Associations, the venture got under way. A Doctor and a Nurse employed by the F.P.A. have paid weekly visits to homes selected by the Health Department in co-operation with the family doctor. The acceptance of this team by the families concerned has been almost 100% and the scheme has been shown to be highly profitable. Not only have nearly all the mothers visited been prepared to accept advice but it has also been found that once the initial barrier of prejudice or apathy has been broken down the individuals concerned are then more ready to visit the local clinic. In my opinion there will always be scope for a domiciliary family planning service but it would appear that many of the homes that can only be reached in this way on the first few occasions can ultimately be kept going in the normal fashion i.e. by the mother visiting the nearest family planning clinic. With the advent of new county clinic premises in the Hyde division in 1966 it is hoped that the Family Planning Association will be able to open clinics in those buildings.

It should be recorded how much we are indebted to Mrs. Sheila Seyd, the local F.P.A. area organiser and to the committees of the Manchester and Stockport branches of the Family Planning Association for the great help they have given to our area. Not only have they helped financially but they have given much of their time and energy to the planning and organisation involved. A special vote of thanks is due to Doctor Lee who having joined in all the preliminary planning, then most bravely took on the onerous task of being the first family planning doorstep consultant in the North West. The success of the venture has been very largely due to the tact and patience she has shown in her approach together with her expert knowledge of her job.

CERVICAL SMEAR TEST

In some parts of Cheshire, clinics have been opened in county premises for the purpose of offering a cervical smear test to women who are in the danger years as regards the possible development of cancer of the cervix. The test is easily carried out and the resulting smear is then sent for examination by a specially trained team of Cytologists.

At the moment the only centres capable of handling specimens from the Hyde division are those at Christie's and at Ashton General Hospital. They are as yet unable to accept more than can be sent in by the practitioners of the area who have all been issued with the appropriate material and instructions as to how the smears should be taken. Until more fully trained staff becomes available at the laboratory and, local authority clinics will not be opened in the Hyde division and any woman wishing to have a smear taken is advised to consult her own family doctor or one of the clinics run by the Family Planning Association. This latter association only takes cervical smears from those women who are on its books for family planning purposes.

Once the required expansion of the hospital facilities has taken place the question of providing clinics in the Hyde area will receive immediate attention

IMMUNISATION AND VACCINATION

1) Immunisation against Diphtheria, Whooping Cough and Tetanus

The figures contained in the following table show the number of children who have been protected against Diphtheria, Whooping Cough and Tetanus. It is in fact usual to employ a mixed vaccine effective against Diphtheria, Whooping Cough and Tetanus for infants and to use a product effective against Diphtheria and Tetanus for the Booster injections given upon entry to school.

	<u>Primary and Reinforcing Treatments</u>				<u>Total under 15</u>
	<u>Under 1</u>	<u>1 - 4</u>	<u>5 - 10</u>	<u>10+</u>	
Diphtheria	-	-	-	-	-
Diphtheria & Tetanus	-	5	381	252	638
Diphtheria and Whooping Cough	-	-	1	-	1
Tetanus	-	-	2	1	3
Triple	155	476	74	6	711
Quadrilin	32	118	7	-	157

2) Vaccination against Smallpox

The following table shows the number of persons vaccinated in the Division during 1965

	<u>Under 1</u>	<u>1</u>	<u>2 - 4</u>	<u>5 - 14</u>	<u>15 and over</u>	<u>Total</u>	<u>(1964)</u>
Number vaccinated	20	87	75	19	18	219	228
Number re-vaccinated	-	-	6	19	45	70	68

3) Vaccination against Poliomyelitis

Routine vaccination of infants continued staisfactorily throughout the year. The primary course now being given at the same time as the Triple Antigen.

The oral vaccine is now used exclusively in the clinics and the consensus of opinion is in favour of the extra protection provided by the oral vaccine.

During August 1965 acute Poliomyelitis was diagnosed in a three year old child living in the Hattersley area of Hyde. She had not been vaccinated against the disease. Within the next few days four other cases came to light. All of them from the same small segment of the Hattersley estate. None had been adequately vaccinated. As soon as the presence of Poliomyelitis on the estate was recognised two emergency clinics were opened on Hattersley for the administration of oral vaccine. Within thirty-six hours and well before the remaining cases were confirmed, virtually the whole of the Hattersley estate had received one dose of the oral vaccine. Whether it was a case of 'propter hoc' or 'post hoc' the desired result was achieved. No more cases occurred and the outbreak finished as suddenly as it had begun.

Owing to public demand clinics in six other areas in the division were opened and vaccine was distributed to all firms that requested it. In addition all schools were visited and the opportunity was taken of offering a full primary course of three doses of oral vaccine to our school population. The reason for this was that the majority of our school children received their primary protection some years ago, when only the killed vaccine, given by injection, was available. Though this protection was far from negligible it was thought wise to supplement it by that given by the oral vaccine, as this protection is of higher potency and more durable.

This formidable vaccination programme resulted in the administration of almost 50,000 doses of vaccine to some 30,000 individuals. All of course received one dose but not so many returned for the second dose and still fewer for the third. Of the school children I am glad to report that virtually all have now received three doses.

The emergency clinics were set up either in schools or in church property. Thanks are due to the Education Committee and Trustees who so readily made their premises available.

These clinics were staffed very largely by volunteers who came both from inside and outside the ranks of local government. They gave every possible assistance without any thought of reward. Their help was invaluable and to all who gave so ungrudgingly of their time to work in the clinics, a deep debt of gratitude is owed not only by the Health Department but by all the community. Becuase of the numbers involved I regret that it is not possible to include a full list of names of those to whom our thanks are due.

Poliomyelitis does not occur in individuals who have been adequately vaccinated. The area in which the outbreak came to light was peopled by those who had been moving house within the last year or so. They were not opposed to vaccination in principle. The Poliomyelitis vaccination programme, coming, as it used to do, after the first seven months of life, had in many cases been omitted. This was in spite of the fact that there was a clinic within a few hundred yards of their homes. A study of our records shows that the percentage of children on Hattersley receiving Poliomyelitis vaccine for the first time during the emergency exceeded 40.

I have no doubt that the recent upheavals in their lives, caused by moving from one locality to another, was largely responsible for the failure of so many to take the logical step of protection for their children. I am glad to say that one of the obstacles to a wholly successful vaccination programme in individuals has been removed by the introduction by a new vaccination schedule during 1965. Under this revised schedule oral poliomyelitis vaccine is now given at the same time as the Triple Antigen i.e. at three months, four months and five months. This means three visits less to the clinic for a busy mother and also means that the vaccination programme is completed during the child's first six months of life when the mother is most likely to be visiting the Infant Welfare Clinic. Experience in all parts has shown that any programme of protection that involves a mother bringing her child to the clinic after it is eight months of age, is never wholly successful.

The following tables show the numbers of doses given since the beginning of the campaign in 1956:-

	<u>Year</u>	<u>Total Doses Given</u>		
	1956	2,138		
	1957	2,332		
	1958	9,048		
	1959	8,866		
	1960	4,077		
	1961	6,586		
	1962	3,608		
	1963	2,164		
	1964	1,918		
<u>Doses given in 1965</u> ⁷⁻	<u>Salk</u>	<u>Oral</u>	<u>Quadrilin</u>	
First dose	11	1,039	98	
Second "	11	1,051	98	
Third "	8	1,077	98	
Fourth "	21	691	60	
	<u>51</u>	<u>3,858</u>	<u>354</u>	(Total 4,263)

⁷⁻ These figures do not include the special campaign referred to above.)

4) Vaccination against Tuberculosis

No. of children offered B.C.G.	410
No. of consent forms received	340
Number tested	338
" negative	289
" positive due to previous B.C.G.	16
" positive due to a natural infection	24
Percentage naturally positive	7.4
Number given B.C.G.	289

It will be noted that of over 400 children who were eligible to receive B.C.G. only 289 actually received the vaccine. To this 289 there should be added another 16 who had received B.C.G. in previous years and being still immune did not require revaccination. This left about a hundred (25% of the total) who did not receive the vaccine. 24 (6% of the total) of these had applied but on being tested were found to have sustained a natural infection already. For them the chance of B.C.G. came too late.

The remainder just opted out. It may be that they did not want a prick or may be they just did not bother. This happens year by year and it means that about one in four of our children in the Hyde area leave school unprotected against tuberculosis. For the County of Cheshire as a whole this figure is about 25% to 28% and for the whole of England and Wales the figure is just over 30%. It would appear that the present government policy of restricting B.C.G. vaccination to children, who are not known contacts, to their last years in school results in at least 30% not receiving the protection that B.C.G. is capable of giving. These children as they move on into adult life will become infected and in their turn will provide a steady stream of new cases. Not all of these new cases will be detected and enough will become chronic cases to maintain the adult pool or reservoir of infection, thus perpetuating the existence of the disease in our country.

Even before reaching adult life substantial numbers of those under the age of 15 will have become clinical cases of Tuberculosis. In the last 12 years, 1953 - 1964 inclusive, notifications of Pulmonary and Non-Pulmonary Tuberculosis in England and Wales in children under the age of 15 totalled no less than 41,955. The Cheshire contribution to that total amounted to 606 cases.

Now we know that adequate vaccination with B.C.G. in young persons will provide virtually 100% protection against the development of obvious clinical disease, and when these young persons pass on into adult life the protection rate still remains as high as 90%.

Experience has shown that where B.C.G. is offered at or soon after birth, the acceptance rate can reach 95% to 98%. Had B.C.G. been offered to all children in England and Wales at birth during 1952 and each year from then onwards, it can be safely assumed that at least 90% would have accepted. With a protection rate of 100% in this group the reduction in the number of notified cases would have been very substantial, becoming greater as the years passed. The

following table shows the number of cases in those under 15 actually notified year by year compared with the number of cases that would have occurred had B.C.G. vaccine been given to 90% at birth, during 1952 and onwards. Had B.C.G. been offered to children of all ages from 1952 onward the fall in numbers would of course have been greater still.

Year	New cases notified in England and Wales (pulmonary and non-pulmonary)	Cases that would not have developed had B.C.G. been given at birth.	Revised total of notified cases had B.C.G. been given at birth.
1953	7107	426	6681
1954	6022	722	5300
1955	5046	908	4138
1956	4154	996	3158
1957	3644	1093	2551
1958	3182	1146	2036
1959	2547	1071	1476
1960	2384	1144	1240
1961	2121	1143	978
1962	2052	1230	822
1963	1916	1265	651
1964	1780	1294	486
Total	41955	12438	29517

Even though the number of cases has fallen very substantially without the use of B.C.G. at birth, the fall would have been greater had the vaccine been used, ranging from a reduction from 426 cases in 1953 to 1294 in 1964. Thus, over 12,000 children would have been spared from developing Tuberculosis during this period. It is probable that in 1965 new cases under 15 will total about 1600 instead of only 350 that might have been expected had 90% of our infant population been given B.C.G. from 1952 onwards.

It is true that the number of new cases of Tuberculosis occurring annually is falling steadily year by year but the fall is only gradual and the time and money spent on treatment is still very great. Not every child recovers from the disease (in 1964 there were 12 deaths under the age of 15) and of the survivors not all will be fully restored, some being permanently crippled. When a disease is wholly preventable I see no reason to be satisfied with a gradual drop in the number of new cases. In this day and age even one new case is unnecessary. To give B.C.G. at birth is a simple and harmless procedure which will provide protection for the next fifteen years. If it is needed, the vaccine can be given again in the last years at school but this would only be necessary for a small percentage. The responsibility for the present policy belongs to the Central Government and not to the local authority, and it is to be hoped that the policy of reserving B.C.G. for the senior school child will one day be changed to the more realistic and better policy of giving it at birth. May that day come soon.

HYDE REGISTER
(Including Hattersley)

	<u>Pulmonary</u>		<u>Non-Pulmonary</u>		<u>Total</u>
	<u>Males</u>	<u>Females</u>	<u>Males</u>	<u>Females</u>	
At 1st January 1965	76	44	5	7	132
at 31st December, 1965					
the position was:-	82	43	4	9	138

HATTERSLEY

(includes residents in
Hyde and Longdendale)

	<u>Pulmonary</u>		<u>Non-Pulmonary</u>		<u>Total</u>
	<u>Males</u>	<u>Females</u>	<u>Males</u>	<u>Females</u>	
Up to 15 years	4 (1)	2 (1)	- (-)	- (-)	6 (2)
16 - 45	11 (8)	21 (10)	- (-)	6 (3)	38 (21)
46 - 65	12 (8)	8 (3)	- (-)	- (-)	20 (11)
66+	1 (-)	- (-)	- (-)	1 (1)	2 (1)
Totals	28 (17)	31 (14)	- (-)	7 (4)	66 (35)

HYDE REGISTER

(excluding Hattersley)

<u>Age Group</u>	<u>Pulmonary</u>		<u>Non-Pulmonary</u>		<u>Total</u>
	<u>Males</u>	<u>Females</u>	<u>Males</u>	<u>Females</u>	
Up to 15	1 (1)	- (2)	- (-)	2 (2)	3 (5)
16 - 45	19 (24)	16 (22)	2 (3)	1 (-)	38 (49)
46 - 65	36 (30)	6 (5)	2 (2)	1 (1)	45 (38)
66+	4 (4)	1 (1)	- (-)	- (-)	5 (5)
	60 (59)	23 (30)	4 (5)	4 (3)	91 (97)

The total numbers recorded in the Tuberculosis Registers in the Division at 31st Decmber, were:-

	<u>Pulmonary</u>		<u>Non-Pulmonary</u>		<u>Total</u>
	<u>Males</u>	<u>Females</u>	<u>Males</u>	<u>Females</u>	
Hyde	82 (76)	43 (44)	4 (5)	9 (7)	138 (132)
Longdendale	11 (8)	15 (4)	4 (3)	3 (1)	33 (16)
Tintwistle	- (-)	- (-)	1 (1)	- (-)	1 (1)
	93 (84)	58 (48)	9 (9)	12 (8)	172 (149)

(1964 totals are shown in brackets)

The Supply of Nursing Requisites, etc.

The issue of nursing requisites, on loan to patients nursed in their own homes continued throughout the year. These articles are stored partly in this office and partly by the District Nurses in their own homes, although, in the case of larger items of equipment, these are issued from the Divisional Office. In addition there are some items at Hollingworth Clinic and one small store is kept in a private house in Broadbottom for which a rental of 10/-d. per annum is paid to the house-holder.

The following aids were issued during the year:-

Bed Pole and Chain	1	Raised toilet seat	1
Walking Aid	3	Commode	3
Wheel Chairs	15	Air-rings and Cushions	22
Back Rests	15	Rubber Sheets	6
Feeding Cups	3	Bed-pans	41
Enuresis Alarm	2	Beds	1
Douche Cans	1	Urinals	6
Receiver Dish	1	Crutches	4
Seat-aid	2	Oxford hoist	1

Once again, through the generosity of residents in the Division, it was possible to provide a number of needy families with many items of furniture and equipment including beds, wardrobes, dressing tables, dining tables, and chairs, cookers, etc. These are greatly appreciated by recipients and the number of items received for distribution appears to be increasing.

In addition to this source of supply the W.V.S. have organised a similar service and have co-operated at all times in making this a worth-while venture. The W.V.S. have continued with the use of a warehouse for the purpose of storing furniture etc. prior to distribution.

There is excellent co-operation between the W.V.S. and the Divisional Health Department and many articles given to the Department are in fact stored in the same warehouse on the understanding that in case of need, either party may distribute any goods which were originally given to the other.

Convalescent Treatment

The Divisional Health Committee is not responsible for sending patients to convalescent homes where it is really an extension of hospital treatment. The cases normally accommodated are people who require a rest and change of air following illness treated at home, or other circumstances in the home necessitating a period of complete rest and a change of environment.

During the year accommodation was arranged for 7 adults and 14 children. The cost incurred during the year was £232.10. 0d. Adults in receipt of National Assistance and children of school age are accommodated free of charge.

Chiropody

As the Committee are now well aware the Chiropody Service is available to persons of pensionable age and certain handicapped people. Treatment is provided free to patients whose income falls below a given figure and over 90% of the cases are receiving free treatment.

Patients may go to the Chiropodist of choice provided the Chiropodist has such qualifications as entitle him to be on the approved list of the Cheshire County Council. The patients are enabled to have an initial course of six treatments at monthly intervals, and thereafter to have six treatments every year. In certain very exceptional cases, more frequent treatment may be obtained if authorised by the Divisional Medical Officer.

Details as to the number of persons receiving treatment under the County Scheme at 31st December, 1965 are summarised in the following table (1964 totals are shown in brackets):-

<u>Males</u>					<u>Females</u>					Grand Total
Home		Surgery		Total	Home		Surgery		Total	
Free	Redu- ced cost	Free	Red- uced cost		Free	Redu- ced cost	Free	Redu- ced cost		
52 (46)	5 (7)	77 (74)	16 (9)	150 (136)	326 (317)	27 (22)	451 (416)	44 (38)	848 (793)	998 (929)

The population of this Division has, of course increased considerably since the advent of Hattersley and the number of persons receiving financial assistance in connection with this service has again increased.

HANDICAPPED PERSONS

Under Section 29 of the National Assistance Act, 1948, the County Council provides Welfare Services for Handicapped Persons and a scheme under this heading has been made the responsibility of the County Health Committee.

In addition to the services rendered by Nurses, Health Visitors and Home Helps the following aids were provided for handicapped persons during 1965.

Bath safety rails	6	Intermediate steps (doorways).....	1
Wooden ramp	1	Wooden steps (doorway to garden path)	1
Footpath crossings, driveways etc	4	Handrails	3
External W.C. erected	1	Wooden shelf *	1
		Flagged pathway	1

*This shelf was fixed immediately inside the front door in order that the handicapped person (lady suffering from severe rheumatoid arthritis) could leave on it appropriate amounts of money for tradesmen who delivered foodstuffs, whereas previously this lady had, of necessity, to invite each and every tradesman into her home and tip the contents of her purse on to the table in order to pay her bills:

this method was unsatisfactory and time-wasting in addition to causing her extra cleaning if snow and/or mud should be brought in on callers shoes. I would add that this shelf is very much appreciated.

Much of the work for handicapped persons in the Division is carried out by voluntary associations who receive grants from the County Council. The Blind Welfare Society at Ashton-under-Lyne and the Ashton Institute for the Deaf carry out much work in the Division. The Manchester Cripples' Help Society has a club which meets weekly, on Tuesdays, at the P.S.A. Hall. This Society also provides visitors for handicapped people, some of these visitors being trained to give occupational therapy. The club meeting at the P.S.A. terminated in October 1965.

Car badges used by handicapped persons were renewed as necessary.

DOMESTIC HELP SERVICE

This service continued as a most valuable aid in the maintenance of sick and aged people in their own homes. In addition some help was given to mothers having their babies in their own homes.

The work of the Domestic Helps is administered by a Supervisor who works equally in this Division and at Stalybridge and Dukinfield. The Supervisor also visits new applicants for Domestic Help in order to assess their respective needs. During 1965 domestic assistance was provided as below.

	<u>No. of Cases</u>
Persons aged 65 years or over	
on first visit in 1965	221
Aged under 65 on first	
visit in 1965	
(i) Chronic sick and tuberculous.....	21
(ii) Mentally disordered	9
(iii) Maternity	18
(iv) Others	11

All the Domestic Helps are employed as temporary staff; the total number of hours worked being 27,617½.

Varying charges for Help are made according to the income of the household and at present range from 3d to 4/9d per hour.

Arrangements can be approved by the Divisional Health Committee whereby the cost of a Domestic Help can be recovered in the future from the estate of an aged person.

CARE OF THE AGED

The majority of elderly people in this Division, when the time comes that they are unable to look after themselves, receive great help from the services of the Health Visitor, Domestic Help, District Nurse, or Chiropodist. In addition the Meals on Wheels Service administered by the Women's Voluntary Service in the area, provides a hot meal on one or two days a week for a large number of people. Provision of accommodation in hospital or old people's home is insufficient particularly during the winter, and again the Division can usually provide services during the waiting period for such accommodation.

Pole Bank Hall and Bowlacre

During the year visits of inspection were made to these two old peoples' homes run by the Borough of Hyde Welfare Committee. At Bowlacre there is accommodation for 43 elderly people, (24 men and 19 women) and at Pole Bank Hall accommodation for 40 women. The homes proved most satisfactory and provided a most useful service for the old people of Hyde.

County Council Welfare Homes

There are several homes throughout the County administered by the County Welfare Committee. The preliminary investigation as to the need and suitability for such accommodation is commonly made by the Health Visitors in the Division. During the year 29 cases were referred to the County Welfare Department through the Divisional Office, and 17 were referred by other people, for example by the patient's general practitioner.

MENTAL HEALTH

During the year the Senior Mental Welfare Officer and members of his staff have investigated and dealt with many cases referred to them for various reasons. Details of action taken and disposal of cases are given below.

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Patients admitted to hospital informally for Psychiatric treatment under Sec. 5, Mental Health Act, 1959	20	26	46
Cases dealt with under Sec. 29, Mental Health Act, 1959, i.e. admitted to Hospital as a matter of urgency.	2	2	4
Cases dealt with under Sec. 25, Mental Health Act, 1959, i.e. admitted to hospital for a period of 28 days for observation.	18	16	34
Cases dealt with under Sec. 26 Mental Health Act, 1959, i.e. admitted to hospital for extended treatment	-	2	2
Cases dealt with under Sec. 40, Mental Health Act, 1959, i.e. returned to hospital after absconding.	7	2	9
Cases dealt with under Sec. 60 Mental Health Act, 1959, i.e. Magistrates Court	1	-	1
	<u>48</u>	<u>48</u>	<u>96</u>

In addition to the above, the following cases also were dealt with under the Mental Health and allied Acts.

13 male and 16 female patients were treated at Out-patient Clinics during the year, thus obviating the necessity for their admittance to hospital.

In the case of 16 male and 17 female cases, information was laid to the Mental Welfare Officer, but after investigation of the circumstances no further action was taken under the Mental Health Act.

The Mental Welfare Officer visited 300 cases in their homes with the Consultant Psychiatrist within the district with a view to deciding the best form of treatment to be afforded to the patient.

1 female patient was referred to the Geriatrician for admission to chronic sick bed.

3 male and 2 female patients were referred to the County Welfare Department for admission to residential accommodation.

2 male and 2 female patients were admitted into Ashton General Hospital on a day basis.

3 female patients were referred to other Agencies not enumerated above, i.e. Ministry of Labour etc.

3 male and 4 female subnormal patients were admitted into Hospital for periods of short term care, to relieve the parents of the responsibility for a short while.

3 male and 2 female subnormal patients have been admitted into permanent care.

The Mental Welfare Officer arranged attendance of 1 male subnormal patient to the Hyde Adult Training Centre.

After-care of patients discharged from Hospital within the District has been carried out throughout the year and 948 visits have been made for the whole of the District.

Domiciliary supervision of subnormal and severely subnormal patients has been carried out within the District.

88 patients have been conveyed to out-patient clinics for consultation with the Consultant Psychiatrist, or to receive treatment throughout the year, when necessary.

The Youth Club for subnormals still continues to meet on Wednesday evening of each week at the Adult Training Centre, Grange Road.

TRAINING CENTRES

Junior Centre

During the year the number of trainees on register rose from 52 in January to 56 in December.

Most of the children travel by the special coaches provided but two children from the Special Care Group have been brought in by Ambulance.

Several "special" events were arranged and the children had a number of outings e.g. :-

Nature Ramble to Lyme Park-
for Junior and Senior Groups

27th May

Visits to Manor Park
Glossop - Infants

20th June

Visit to Hyde Fire Station

6th July

Parents Evening

Childrens' work on display and parents given
• opportunity to discuss problems

20th July

Open Day

Parents and friends able to see display of activities by children

27th July

Outing to Southport Junior and Senior

A generous contribution was made by the North East Cheshire Society towards the cost of this outing.

8th September

Coffee Evening

18th October

Christmas Party

14th December

The Staff of the Centre consists of :-

- 1 Supervisor
- 5 Assistants
- 1 Meals Assistant
- 2 Escorts
- 2 Cleaners (part-time)

Mrs. Tomkinson (Supervisor) attended a conference in London organised by the Guild of Teachers of Backward children.

Mrs. Brewerton attended a Refresher Course organised by Staffordshire County Council.

Miss Heaton commenced the two year N.A.M.H. Course in Manchester, and a temporary assistant has been appointed in her stead.

Adult Centre

At the beginning of the year there were 61 trainees on Register and, at the time of writing this report, the number had risen to 67.

Thirty trainees, accompanied by three members of Staff, went to St. Annes-on-Sea for a weeks holiday (24th April - 1st May) and although it was a rather cold week everyone had a wonderful time. Visits were paid to the "Gang Show" and two Cinemas; football and cricket were played on the beach, and the amusement arcades on the pier were patronised on particularly cold mornings. The cost to each Trainee was £5. 5. 0d hotel charges, and 10/- fare. The only incident of note occurred during a boating session when two of the young men managed to sink their craft. Fortunately the lake was very shallow and, with the boat resting on the bottom of the lake, they sat with arms folded awaiting rescue. Help was quickly forthcoming and they were none the worse for their ducking. The boys saw the funny side of it and now get a kick out of relating the incident to their friends.

Visits to the swimming baths have continued during the year. Sixteen trainees attend regularly and due to the combined efforts of Centre Staff and Instructors at least a dozen trainees have been taught to swim. This is all the more gratifying when it is borne in mind that several of them had never before visited a swimming bath.

The scope of the Centre has again widened and work now done includes:-

Contract Work

Folding of several thousand parchments for use as greeting card display folders.

Turning glove linings (approximately 150 dozen pairs per day)

Assembling small electrical components.

Own Products

Cord seated stools

Nylon pan scrubs

Collapsible clothes props

Shopping bags

Peg bags

Tea cosies

"Nytrim" covered coat hangers

Rubber link-mats

Wash leathers

Foam-rubber covered coat hangers

Chopping and bundling firewood

Handbags

Bed Slippers

Weather permitting physical instruction is conducted in the grounds of the centre, otherwise in the assembly hall.

The Housecraft Centre is now used extensively, and includes cookery once a week, and laundry work. Trainees in groups of two or three are now being encouraged to visit neighbouring shops and, working in pairs, it has been found possible to allow them to accompany the Divisional Transport van on certain of its journeys around the district. This is good training and has proved to be a great help to Mr. Broadbent, the driver, when lifting and carrying has to be done.

Two trainees were placed in "outside" employment during the year and it is hoped that these appointments may prove to be permanent.

The Christmas Dinner and entertainment was a great success - each trainee receiving a present from the Centre, and from the North East Cheshire Society for the mentally Handicapped.

The Staff at the Centre is now:-

1 Superintendent

1 Dep. "

3 Instructors (male)

2 Instructors (female)

1 Driver-Handyman (part-time)

1 Cook

1 Canteen Assistant

2 Cleaners (part-time)

Mr. Hibbs (Instructor) and Miss Fieldhouse (Instructor) are at present attending a twelve-month Diploma Course at the College of Commerce, Kingston-upon-Hull, and temporary replacements have been appointed.

MISCELLANEOUS

1) Health Education

Appropriate posters and film strips have been displayed at each of the Clinics. A 16 m.m. film projector has been provided for the Division but it will not be possible to make full use of this until the new offices and clinic are completed. It is hoped that a single-concept projector may be obtained for use in clinics.

2) Day Nurseries

Inspections have been made of the Day Nursery at Ashton Brothers, Carrfield Mills, Hyde. This Nursery is registered to have 56 children and has proved satisfactory in all respects.

